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**From : Winston Hsu, Registration No. 41,526**

**Serial No.: 10/708,619**

**Attorney Docket No.: CMDP0008USA**

**Subject: Response to the Office Action mailed on 04/20/2005**

**Total Pages: 17 pages (including cover page)**

**Winston Hsu 07/07/2005**

**CMDP0008USA0\_A2\_1**

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

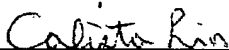
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(2) Fee Transmittal	1 PAGE
(3) Response to the Office Actoin	9 PAGES
(4) Drawings	4 PAGES

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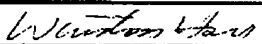
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/708,619	
	Filing Date	03/16/2004	
	First Named Inventor	Yo-Shen Lin	
	Art Unit	2817	
	Examiner Name	HAM, SEUNGSOOK	
Total Number of Pages in This Submission	15	Attorney Docket Number	CMDP0008USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	North America Intellectual Property Corporation		
Signature			
Printed name	Winston Hsu		
Date	07/07/2005	Reg. No.	41,526

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 0.00

**Complete If Known**

Application Number	10/708,619
Filing Date	03/16/2004
First Named Inventor	Yo-Shen Lin
Examiner Name	HAM, SEUNGSOOK
Art Unit	2817
Attorney Docket No.	CMDP0008USA

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-3105 Deposit Account Name: North America Intellectual Property Corp.

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**      **Multiple Dependent Claims**

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**

- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

**SUBMITTED BY**

Signature	<i>Winston Hsu</i>	Registration No. (Attorney/Agent)	41,526	Telephone	302-729-1562
Name (Print/Type)	Winston Hsu	Date	07/07/2005		

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**LUMPED-ELEMENT TRANSMISSION LINE IN MULTI-LAYERED  
SUBSTRATE**

Appl. No. : 10/708,619 Confirmation No. 2618  
Applicant : Yo-Shen Lin,  
Ko-Mai Li  
Filed : March 16, 2004  
TC/A.U. : 2817  
Examiner : SEUNGSOOK HAM  
Docket No. : CMDP0008USA  
Customer No. : 27765

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

5 Sir:

In response to the Office action of April 20, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

10 **Amendments to the Drawings** begin on page 5 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

**Remarks/Arguments** begin on page 6 of this paper.

**An Appendix** including amended drawing figures is attached following page 9 of this paper.